

FEC FORM 2

STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)

Mr. Steve Stivers

(b) Address (number and street)

372 W 2nd Avenue

☐ Check if address changed

2. Identification Number

H8OH15076

(c) City, State and ZIP Code

Columbus

OH

43201-3312

3. Is This Statement

☐ New (N)

OR

☒ Amended (A)

4. Party Affiliation

REPUBLICAN PARTY

5. Office Sought

House

6. State & District of Candidate

OH 15

DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 election(s).
(year of election)

NOTE: This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

Stivers For Congress

(b) Address (number and street)

4679 Winterset Drive

(c) City, State and ZIP Code

Columbus

OH

43220-8113

DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

The Ohio Five

(b) Address (number and street)

228 S Washington Street

Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate

Mr. Steve Stivers

Date

07/02/2011

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Freshman Majority Fund

(b) Address (number and street)

2470 Daniels Bridge Road
Suite 121

(c) City, State and ZIP Code

Athens

30606

6188

DESIGNATION OF OTHER AUTHORIZED COMMITTEES**[ADDITIONAL]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Team 2012

(b) Address (number and street)

228 S Washington Street
Suite 115

(c) City, State and ZIP Code

Alexandria

22314

5404